

**HAWAII STATE ETHICS COMMISSION**

1001 BISHOP STREET, HONOLULU, HAWAII 96813

or P.O. BOX 616, HONOLULU, HAWAII 96809

TEL: (808) 587-0460 FAX: (808) 587-0470

email: ethics@hawaiiethics.orgWeb site: www.hawaii.gov/ethics

THIS SPACE FOR OFFICE USE ONLY

NOTE: This is a public document.

13 JAN 28 P4:15

LOBBYIST REGISTRATION FORM
(Type or Print Clearly) STATE ETHICS COMMISSION**PART I LOBBYIST**

NAME (Last)	(First)	(Middle)	TELEPHONE
Morris	George "Red"	Arthur	(808) 531-4551
MAILING ADDRESS (Street)			FAX (808) 533-4601
222 South Vineyard Street, Suite 401			EMAIL gamorrisinc@aol.com
(City)	(State)	(Zip Code)	
Honolulu	HI	96813-2453	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Capitol Consultants of Hawaii, LLP.			(808) 531-4551
MAILING ADDRESS (Street)			FAX (808) 533-4601
222 South Vineyard Street, Suite 401			EMAIL gamorrisinc@aol.com
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	

PART II ORGANIZATION

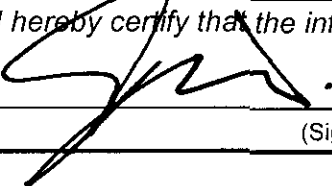
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE	
American Family Life Assurance Company of Columbus (AFLAC)	(706) 596-3306	
MAILING ADDRESS (Street)	FAX (706) 596-3908	
Worldwide Headquarters, 1932 Wynnton Road	EMAIL gallen@aflac.com	
(City)	(State)	(Zip Code)
Columbus	GA	31999
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE	
R. Gary Allen	(706) 596-3306	
MAILING ADDRESS (Street)	FAX (706) 596-3908	
Worldwide Headquarters, 1932 Wynnton Road	EMAIL gallen@aflac.com	
(City)	(State)	(Zip Code)
Columbus	GA	31999

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | _____ |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

1/23/13

(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
R. Gary Allen	Second Vice President, Governmental Relations

NAME OF ORGANIZATION (if applicable)	TELEPHONE
American Family Life Assurance Company of Columbus (AFLAC)	(706) 596-3306

MAILING ADDRESS (Street)	FAX
Worldwide Headquarters, 1932 Wynnton Road	(706) 596-3908

EMAIL
gallen@aflac.com

(City)	(State)	(Zip Code)
Columbus	GA	31999

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.



(Signature of Authorizing Officer or Person Represented)

1/22/13

(Date)